

COMMERCIAL ABOVE GROUND STORAGE TANK REMOVAL PERMIT APPLICATION & INSPECTION CHECKLIST

 <p><u>NEW HANOVER COUNTY FIRE SERVICES</u> 230 GOVERNMENT CENTER DR., SUITE 130 WILMINGTON, NORTH CAROLINA 28403 (910) 798-7420, Fax (910) 798-7052 e-mail: fireforms@nhcgov.com</p>	 <p align="right"><u>CITY OF WILMINGTON FIRE AND LIFE SAFETY</u> 801 MARKET STREET WILMINGTON, NC 28401 (910) 343-0696 Fax (910) 341-0097 e-mail: fls@wilmingtonnc.gov</p>
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Is your project located in the Wilmington City limits ____ or the unincorporated area of New Hanover County ____?

CONTRACTOR REQUESTING PERMIT	
NAME: _____	OFFICE PHONE _____
ADDRESS: _____	FAX _____
CONTACT PERSON: _____	CELL _____ E-MAIL _____
LICENSE # _____	

TANK INFORMATION	
LOCATION OF TANK(S) TO BE REMOVED _____	
NAME OF BUSINESS/FACILITY _____	
OWNER NAME: _____	PHONE _____
ADDRESS: _____	FAX _____
CONTACT PERSON: _____	CELL _____ E-MAIL _____

PERMIT INFORMATION					
AG Tank Info	Tank #1	Tank #2	Tank #3	Tank #4	Tank #5
Tank Capacity					
Substance Stored					
Is Tank Regulated?					
Tank Constructed of					
Piping Constructed of					

FEE FOR PERMIT WILL BE ASSESSED BY APPROPRIATE PERMITTING JURISDICTION	
Method of Payment CASH CHECK CREDIT CARD CHARGE ACCOUNT # _____	
Date of Application _____	Applicants Name _____
Applicants Signature _____	
<small>By signing this permit application, you certify that all information provided is accurate and correct.</small>	

OFFICE USE ONLY

<p>PERMIT NUMBER ASSIGNED: _____</p> <p>Permit Fee Assessed _____</p> <p>Inspector Reviewing Application _____</p> <p>Application for Permit AP _____ or DA _____</p> <p>Comments _____</p> <p>_____</p> <p>_____</p> <p>_____</p>	<p>DATE OF INSPECTION: _____</p> <p>Inspected by _____</p> <p>Inspection AP _____ or DA _____</p> <p>Project Notes: _____</p> <p>_____</p> <p>_____</p> <p>_____</p>
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GENERAL TANK INFO	TANK #1	TANK #2	TANK #3	TANK #4	TANK #5
1. Tank capacity (gallons)					
2. Substance stored					
3. Is tank regulated?					
4. Construction material-tank					
5. Construction material-pipe					

TANK CLOSURE INFORMATION - Respond: Y=yes, N=no or ?-did not observe					
1. Product & piping removed from AG Tank?					
2. Vapors purged or inserted from AG Tank?					
3. AG Tank filled with solid inert material (if abandoned)?					
4. Holes in tank observed?					
5. Free product observed in excavation?					
6. Groundwater in excavation?					
7. LEL of product within safe range?					
8. No smoking signs in placed within 25' of AG Tank?					
9. All openings plugged except ¼" vent for release of pressure?					
10. Tank labeled for former contents?					
11. Current vapor state labeled on tank?					
12. Warning against reuse labeled on tank?					
13. Vapor freeing method labeled on tank?					
All piping, gauge & tank fixtures, appurtenances, & vent disconnected & removed?					

INSPECTION COMMENTS
